

# Twin Pines Veterinary Clinic Boarding Agreement

102 Industrial Road, Hinckley, MN 55037  
320-384-7004

1. **CHECK-IN/OUT TIME:**

MONDAY – FRIDAY: 8:30 AM TO 4:30 PM

SATURDAYS – SUNDAYS: 8:00 AM TO 10:00 AM or 4:00 PM TO 6:00

OBSERVED HOLIDAYS: 8:00 AM TO 10:00AM or 4:00PM to 6:00PM

Monday through Friday, if you pick up after 12:00 pm you will be charged for an additional one-half night.

Saturday and Sunday, if you pick up between 4:00 pm and 6:00 pm you will be charged for an additional one-half night. Please be advised that trained personnel are not on the premises 24 hours a day, but we do monitor with video surveillance 24 hours a day, 7 days a week.

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INITIALS

2. **VACCINATIONS:** Proof of current vaccinations is required to be sent before your pet's boarding stay. It is your responsibility to acquire these records. This proof must be in writing from the licensed veterinarian who administered the vaccinations. We are not able to accept vaccines done by a breeder or those that have been administered at home. Canine vaccination requirements include Distemper Combination, Bordetella, and Rabies. Feline vaccination requirements include Distemper Combination, Feline Leukemia, and Rabies. **All vaccinations must have been given at least a minimum of 7 days prior to your pet's stay.** We are unable to make exceptions.

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INITIALS

3. **FLEA AND TICK CONTROL:** We **require** that all animals be treated for fleas and ticks. Please advise us of the product used and approximate date administered:

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INITIALS

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If your pet is found with fleas or ticks, and not currently on a preventative, we will provide treatment at your expense.

4. **MEDICATIONS:** Any oral or topical medications administered while boarding are \$2.00 per day. Insulin or other injectable medications incur a charge of \$3.00 per day.

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INITIALS

5. **BEHAVIOR:** If you are boarding your pets together in one kennel and there are problems such as fighting or an unaltered female going into heat, we reserve the right to separate them if necessary.

INITIAL: \_\_\_\_\_  
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6. **LIABILITY:** You may leave personal items such as blankets, toys, bedding, etc., for your pets. Please understand that we will make every effort to keep track of those items while your pet is boarding, but we are not responsible for these items if lost or

INITIAL: \_\_\_\_\_  
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damaged. If you cannot bear to lose it, or it is not replaceable, we ask that you do not bring it.

7. **MEDICAL ATTENTION:** In the event your pet becomes ill or injured during their stay, we will do our best to contact you at the number(s) you leave for us. If we cannot reach you, Twin Pines Veterinary Clinic, PA will perform any medical measures we feel are necessary under the circumstances at regular office/hospital fees. We hope this never becomes necessary, but we feel strongly that we must do what is best for your pet while in our care. INITIAL: \_\_\_\_\_
  
8. **FEEDING OPTIONS:** The food included in the nightly boarding price is Fromm. We can provide canned food at retail cost with the dry to encourage them if they are not showing interest in the dry food. I authorize this feeding option if necessary. INITIAL: \_\_\_\_\_  
(Circle One) Y N
  
9. **CHECK-OUT:** If you have authorized someone other than yourself to pick up your pet(s) from boarding, we will require you to sign the boarding drop off sheet per boarding stay stating the person's name and contact number. Pick up person will also need to bring a form of identification at check-out before animal will be released into their care. INITIAL: \_\_\_\_\_
  
10. **PAYMENT AGREEMENT:** Payment for all boarding stays are due at the time of pick-up. Acceptable forms of payment are either cash or credit card only. If someone other than yourself will be picking up your pet you may arrange to pre-pay for your stay at the time of drop off, otherwise it is your responsibility to be sure you arrange payment. If extensions are made to your stay you are required to pay for your stay up to the time they were originally scheduled for at the time of the extension. INITIAL: \_\_\_\_\_
  
11. **LONG TERM BOARDING:** If you will be boarding you pet(s) for longer than 14 nights we require you to pre-pay at least half the cost of the whole stay for all pets boarding at the time of check in. INITIAL: \_\_\_\_\_

I am the owner, or legal authorized agent, for the above named animal(s). I agree to the policies set forth by Twin Pines Veterinary Clinic, PA, and do hereby agree to pay any and all charges prior to the discharge of the aforementioned pets.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Staff Initials \_\_\_\_\_